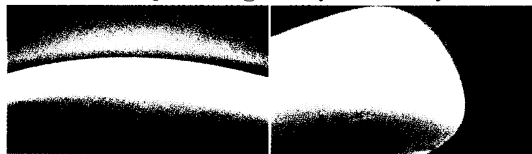


The Modified J-Loop posterior chamber lens from Cilco.



Cilco's SK20/21 lens is lathe cut from Perspex[®] CQ polymethylmethacrylate, the intraocular lens material providing a 30-year history of evaluation in the eye. All surfaces, even the tips of the



Scanning electron micrographs taken by Alan F. Pooley, Ph.D., Peabody Museum, Yale University.

Prolene[™] loops, are polished to absolute smoothness by proprietary procedures. The scanning electron micrographs shown here demonstrate just how smooth the Cilco lens edge and loop tips are. Please contact your Cilco office for additional information or videotape on implantation.

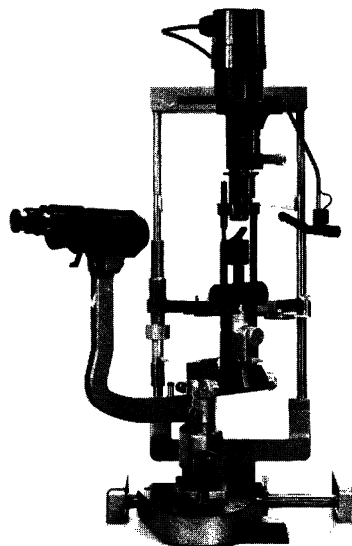


U.K., Ireland and Scandinavia: CILCO, Inc., 3 Waterdene House, Water Lane, Leighton Buzzard, Bedfordshire LU77AW, England • Telephone: (0525) 381122; U.S.A.: CILCO, Inc., 1616 13th Avenue, Box 1680, Huntington, WV 25717 • Telephone: 304-697-4422; Australia • Canada • Europe, Middle East and Africa • Japan and Korea • Latin America • W. Germany.

HAAG-STREIT QUALITY.....ACCURACY HAAG-STREIT

BM900 Slit Lamp

The Haag-Streit slit lamp system offers many original features including variable luminosity of the slit image, high precision slit adjustment, microscope with large field of stereoscopic view, single joystick control and a fixation light visible within a 90° cone. A standard tonometer and other accessories for the measurement of corneal thickness and anterior chamber depth are also available.

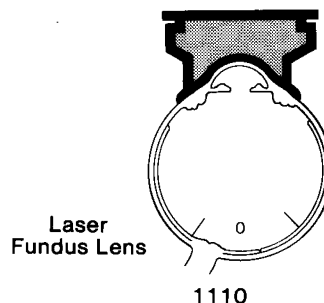
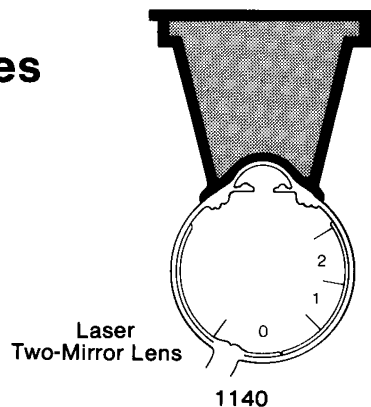


Laser photocoagulation lenses

Haag-Streit's photocoagulation lenses include perfect optical quality, durability and ease of sterilization.

All-glass lens construction with anti-reflective coating insure against development of Newtonian rings. Absolutely plane mirrors guarantee accuracy and precision.

Two models are available; the Laser Fundus Lens 1110 for the posterior pole of the fundus and the Laser Two-Mirror Lens 1140 for the posterior pole and the periphery of the fundus with angles of 67° and 73°.



**Clement Clarke
International Ltd.**

15 Wigmore Street,
London W1H 9LA.

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SURGITEK[®] OPTIKON[®]

*An ideal aspiration/irrigation
unit for extracapsular
procedures*

The Surgitek unit has a unique flow control to maintain the anterior chamber depth during extracapsular procedures. A transducer constantly measures the suction level and the linear foot control allows the surgeon to increase the amount of suction gradually. A venting system automatically prevents increase of suction above the pre-set level. Infusion can be controlled by the footswitch and if necessary the operator can reverse the suction to avoid unwanted aspiration of tissue.



LOW REVENUE COSTS —

All tubing and instruments
are autoclavable and
re-usable.

- ☐ Improved control of anterior chamber depth during extracapsular procedures.
- ☐ Linear footswitch to control the amount of suction gradually.
- ☐ Actual suction level continually controlled by a vacuum transducer.
- ☐ Smooth control of suction with any pre-set value from 0 to 300mmHG.
- ☐ Suction can be inverted (reflux).
- ☐ Simultaneous irrigation/aspiration, or irrigation only controlled by footswitch.

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 1a Old Bond Street W1X 3TD 01-493 5778/9
 19 Royal Exchange EC3V 3LP 01-626 5000
 52 Sloane Square SW1X 8AX 01-730 7900
 28 Lower Marsh, Waterloo SE1 7RG 01-928 5343 & 5760
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16 London Road 01-594 1919 & 3700

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107 Old Christchurch Road 0202 22801

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HAMPSTEAD, London NW3

26 Heath Street 01-435 6658

HARLESDEN, London NW10

31 Craven Park Road 01-965 5455

HARROW, Middx

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 250 Imperial Drive, Rayners Lane 01-868 8922

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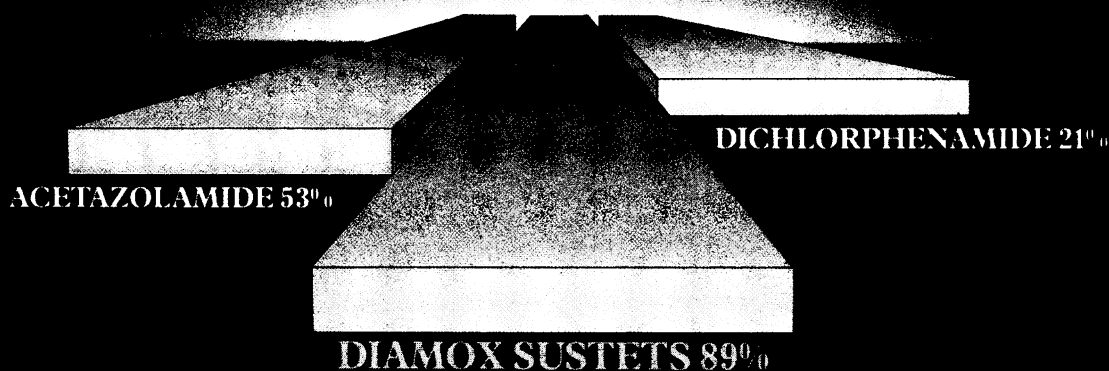
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“MOST READILY ACCEPTED”¹”

Diamox Sustets – sustained release acetazolamide has a far longer duration of effect in glaucoma than any other treatment. Diamox Sustets provides smooth and predictable control of intra-ocular pressure – with significant reduction in the adverse effects associated with systemic therapies for this condition.¹

Diamox Sustets, with a simple b.d. dosage is well accepted by patients ...



... and physicians, alike.

Eighty-nine percent of the patients tolerated acetazolamide sustained release capsules.¹

“Acetazolamide sustained release [Diamox Sustets] therapy seems the regimen most readily accepted, involving least amount of subjective intolerance and a prolonged effect most desirable for round-the-clock control”.¹

acetazolamide

THE SYSTEMIC TREATMENT FOR GLAUCOMA

INDICATIONS Glaucoma. **DOSAGE Adults:** One capsule at night and in the morning. **Contra-indications:** Idiopathic renal hyperchloraemic acidosis. Addison's disease or all types of suprarenal gland failure. Long-term administration in patients with chronic congestive angle-closure glaucoma. **Precautions:** The patient should be cautioned to report any unusual skin rash. Periodic blood cell counts are recommended. The transitory loss of hearing calls for immediate cessation of medication. **Side-effects:** Drowsiness, paraesthesia of extremities and face may occur. Diamox is a sulphonamide derivative and therefore some side-effects similar to those caused by sulphonamides have occasionally been reported. **Drug interactions:** Possible potentiation of the effects of folic acid antagonists, hypoglycaemics and oral anticoagulants may occur. **Package quantities:** Transparent orange capsules each containing 500mg. of acetazolamide and printed 'Lederle 4309' in bottles of 30, 100 and 500. **Basic N.H.S. cost:** £27.53 per 100. **PL 0095/5074.**

¹Trademark. **References:** 1. Garner, I.L., et al, Amer. J. Ophthalmol, 1963, 55, (2), 323-327. 2. Lichter, P.R. et al, Amer. J. Ophthalmol, 1978, 85, (4), 495-502.



Lederle Laboratories. A division of Cyanamid of Great Britain Limited. Fareham Road, Gosport, Hampshire PO13 0AS.
Tel. no. (0329) 236131.

NEW
PRODUCT

A SIGNIFICANT DROP for inflammation and infection



FML-Neo

fluorometholone and neomycin

The proven efficacy of a potent ocular steroid, with a substantially reduced tendency to elevate intraocular pressure combined with a broad spectrum antibiotic.

ALLERGAN

Allergan Limited Turnpike Road
Cressex Industrial Estate
High Wycombe Bucks HP12 3NR



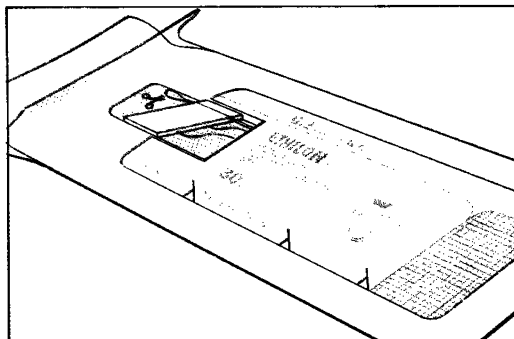
Presentation Sterile, white, microfine ophthalmic suspension containing fluorometholone, NF 0.1%, and neomycin sulphate, BP 0.5% (equivalent to 0.35% neomycin base). **Uses** FML Neo is indicated for the management of steroid responsive inflammation of the palpebral or bulbar conjunctiva, cornea and anterior segment of the globe, when threatened or complicated by infection with neomycin sensitive organisms. **Dosage and Administration** One to two drops in the conjunctival sac two to four times daily. During the initial 24 to 48 hours, the dosage may be safely increased to one drop every hour. Care should be taken not to discontinue treatment prematurely. Shake well before using. **Contra-indications, Warnings, etc.** Acute untreated purulent ocular infections. Acute superficial herpes simplex (dendritic keratitis), vaccinia, varicella and most other viral diseases of the conjunctiva and cornea. Ocular tuberculosis, fungal diseases of the eye and hypersensitivity to any of the components of the drug. **Warnings** In diseases due to micro organisms resistant to neomycin, infection may be masked, enhanced or activated by the steroid. Prolonged use may result in overgrowth of non-susceptible organisms. Articles in current medical literature indicate an increase in the prevalence of persons sensitive to neomycin. The possibility of such a reaction should be borne in mind. If sensitivity or other untoward reactions occur, discontinue the medication. As fungal infections of the cornea have been reported coincidentally with long term steroid applications, fungal invasion may be suspected in any persistent corneal ulceration where a steroid has been used, or is in use, over a prolonged period of time. In those diseases causing thinning of the cornea, perforation has been known to have occurred with the use of topical steroids. Acute purulent untreated infections of the eye may be masked, enhanced or activated by the presence of steroid medication. Secondary ocular infection may occur from pathogens liberated from ocular tissues. Use of steroid medication in the presence of stromal herpes simplex requires great caution; frequent slit lamp microscopy is required. Reports in the literature indicate that posterior subcapsular lenticular opacities have occurred after heavy or protracted use of topical ophthalmic corticosteroids. Eye drops containing corticosteroids should not be used for more than one week except under strict ophthalmic supervision with regular determination of intraocular pressure. This preparation contains benzalkonium chloride and should be used with caution in association with hydrophilic contact lenses. **Precautions** Patients with histories of herpes simplex keratitis should be treated with caution. Use of topical steroids may increase intraocular pressure. Safety of intensive or protracted use of topical steroids during pregnancy has not been substantiated. Local side effects of steroid therapy, i.e. skin atrophy, striae and telangiectasia, are especially likely to affect facial skin. **Pharmaceutical Precautions** Shake well before using. Do not freeze. **Legal Category** POM **Package Quantities** Available in 5ml plastic dropper bottles. Basic N1/S Cost (as at August 1983) £1.90. PL 0426 0X43 Full prescribing information is available on request.

FMNE2

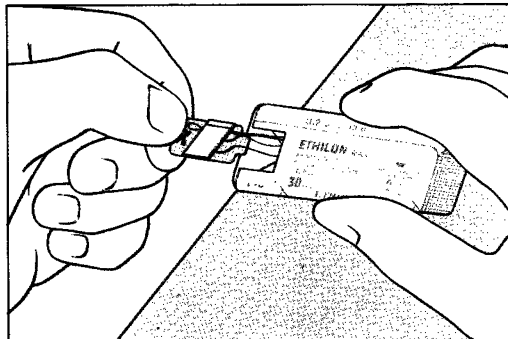
Stays sharper, longer.



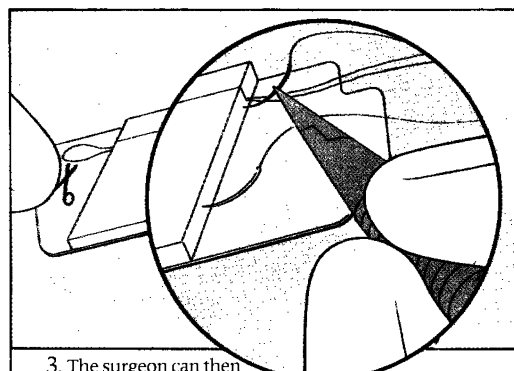
The new MICRO-POINT X spatula needle



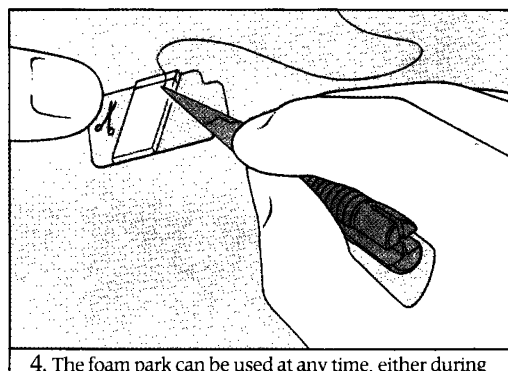
1. The outer overwrap has been removed and the sterile inner pack is placed on the trolley ready to be dispensed.



2. The inner folder has been removed from the pack and the needle foam park is being moved towards the operating field. No unwinding or handling of the delicate needle or suture is necessary.



3. The surgeon can then take the needle from its protective foam park, cutting the suture either at the mid-point as indicated by the loop or at any position along its length.



4. The foam park can be used at any time, either during the procedure to keep the needle safe within the operating field until required, or at the end for needle count and safe disposal.

In the exacting field of anterior segment surgery, higher and higher standards are being demanded.

A prime objective for Ethicon has been to improve the penetration of the eyeless needle to new levels, using advanced manufacturing techniques.

Now the new MICRO-POINT X Spatula Needle brings you that new standard—plus the ability to retain penetration, not just for the first few passes, but right through until the suture has been placed

and the incision closed.

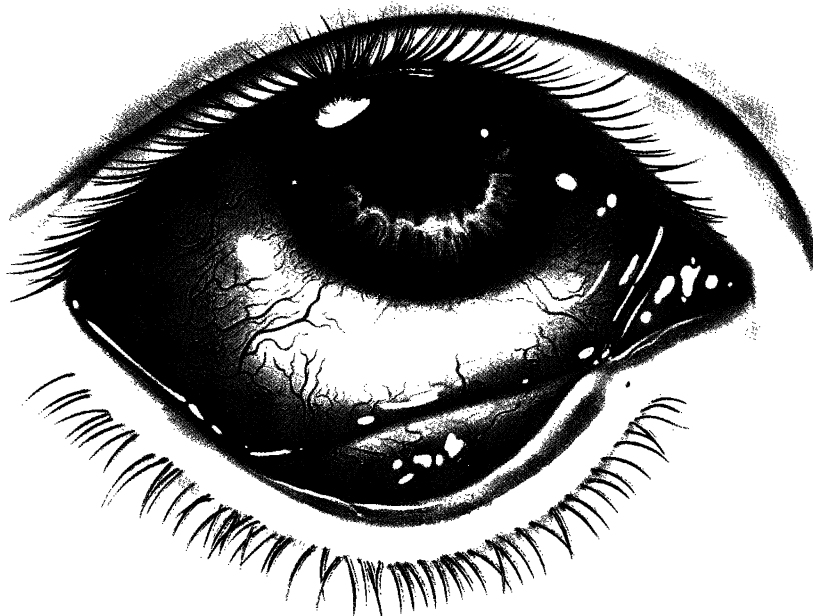
Complementing this new needle will be a 'tangle-free' method of dispensing the suture without the need to unwind. An easily-handled needle foam park enables the suture to be brought within the field of the

operating microscope. It also provides a means of holding a partially used needle where the surgeon wants it, protected from damage but immediately ready for picking up with the needle holder.

MICRO-POINT X
spatula needle

ETHICON

ETHICON Ltd., P.O. Box 408, Bankhead Avenue,
Edinburgh EH11 4HE, Scotland.
*Trademark © ETHICON Ltd 1982



Chloromycetin^{*}

chloramphenicol Ph Eur

ensures effective control
of bacterial infections of the eye

Specify

Chloromycetin
the quality an eye deserves

PRODUCT INFORMATION FROM PARKE-DAVIS RESEARCH LABORATORIES

Prescribing Information

Composition: (i) Chloromycetin Redidrops* (Ophthalmic) 0.5% (Chloramphenicol Eye Drops B.P.) Chloramphenicol Ph. Eur. 5 mg Boric Acid Ph. Eur. 15 mg Borax Ph. Eur. 3 mg Phenylmercuric Acetate B.P.C. 1973 0.02 mg Purified Water Ph. Eur. qs to 1 ml (ii) Chloromycetin Ophthalmic Ointment (Chloramphenicol Eye Ointment B.P.) Contains 1% chloramphenicol Ph Eur in a petrolatum base. **Indications:** Treatment of bacterial conjunctivitis caused by the organisms *Escherichia coli*, *Haemophilus influenzae*, *Staphylococcus aureus*, *Streptococcus haemolyticus*, *Morax-Axenfeld* and others. **Dosage:** The recommended dosage for adults, children and infants of all age groups is two drops or a small amount of ointment, to be applied to the affected eye every 3 hours or more frequently if required; treatment should be continued for at least 48 hours after the eye appears normal. **Contra-indications, warnings etc:** Chloromycetin Ophthalmic Preparations should not be administered to patients hypersensitive to chloramphenicol. In severe infections the topical use of chloramphenicol should be supplemented by appropriate systemic treatment. The prolonged use of antibiotics may occasionally result in overgrowth of non-susceptible organisms including fungi. If any new infection appears during treatment the antibiotic should be discontinued and appropriate measures taken. Chloramphenicol should be reserved for use only in infections for which it is specifically indicated. Aplastic anaemia has been reported following topical use of chloramphenicol. Whilst the hazard is a rare one, it should be borne in mind when assessing the benefits expected from the use of this compound. **Product licence holder:** Parke, Davis and Company, Mitchell House, Southampton Road, Eastleigh, Hampshire SO5 5RY. **Product licence nos:** Chloromycetin Redidrops 0018/0065 Chloromycetin Ophthalmic Ointment 1% 0018/5074. **Basic NHS Cost:** Redidrops 5ml £1.05, 10ml £1.12; Ointment 4g tube £0.61. Further information is available from: Parke-Davis Medical, Parke-Davis Research Laboratories, Mitchell House, Southampton Road, Eastleigh, Hampshire SO5 5RY. Telephone (0703) 619791.

Parke-Davis Medical
RESEARCH LABORATORIES

*Trade mark P146-UK-Oct 83

In the treatment of glaucoma



you need to open
as well as turning off

Ganda has been shown to enhance the outflow
facility as well as reducing secretion.*

Ganda[®]

Guanethidine monosulfate Ph. Eur. and Adrenaline BP

a non-miotic therapy for glaucoma, currently available in four strengths:—

Ganda 1+0.2% Ganda 3+0.5% Ganda 5+0.5% Ganda 5+1%

*Reference Hoyng Ph.F.S. & Dake C.L. in
'Pharmacological Denervation and Glaucoma' published
by Dr. W. Junk bv, The Hague (1981) pp 105-112

DOSAGE AND ADMINISTRATION Adults: One drop to be instilled into the eye once or twice daily or at the discretion of the physician. Children: At the discretion of the physician.

CONTRA-INDICATIONS, WARNINGS ETC. Ganda should not be used in the case of a narrow angle between the iris and cornea as pupillary dilation may precipitate angle closure. Occasionally orbital discomfort or red eye (hyperaemia) may occur. Other side effects, such as local irritation and headaches are rare. When used in conjunction with miotics, Ganda should follow the miotic after an interval of 5-10 minutes. Ganda should not be used if the solution has become dark amber. The contents of the bottle should be discarded one month after the pouch has been opened. Ganda is fully potent for two years providing the pouch remains unopened.

Product Licence Numbers: 0033 0069 70 71 75

Full prescribing information is available on request.



SMITH & NEPHEW
Pharmaceuticals Ltd

Bampton Road, Romford, RM3 8SL

NEW
PRODUCT

When real tears don't come easily.



Lacri-Lube ophthalmic ointment is indicated for the lubrication and protection of the dry eye where regular instillation of aqueous drops is not possible, such as during sleep.

Petroleum-base ointments are retained in the eye longer than aqueous solutions,¹ thus Lacri-Lube offers

comfort and convenience at night for the dry eyed patient.

Lacri-Lube
(petrolatum mineral oil)

ALLERGAN

Allergan Limited,
Turnpike Road, Cressex
Industrial Estate,
High Wycombe,
Bucks HP12 3NR.



The next best thing at night

Presentation: Sterile, bland, non-medicated ointment for topical administration to humans, containing white petrolatum mineral oil, non-ionic lanolin derivatives with chlorobutanol 0.5% as a preservative. Uses: Useful as adjunctive therapy to lubricate and protect the eye in conditions characterised by exsiccative keratitis, decreased corneal sensitivity, recurrent corneal erosions, and keratitis sicca. Dosage and Administration: For topical administration. Pull lower lid down to form pocket. Apply small amount as needed. Contra-indications, etc: No known contra-indications. Pharmaceutical precautions: Store away from heat. To avoid contamination during use, do not touch tip to any surface. Legal Category: P. Package Quantities: Available in 3.5g ophthalmic tubes. Basic NHS cost (as at November 1982): £1.76. PL0426/0041. Further information is available on request. References: 1. Cross D.A., Krupin T., Anaesthesia & Analgesia... Current Researches 1977; 56,1: 35-37.

The Lacrimal Gland – the best source of ocular lubrication

Electron micrograph of lacrimal gland $\times 9,000$
Kindly supplied by Prof. G. L. Ruskell, The Division of Ocular Anatomy The City University London



Sno® TEARS – a suitable replacement

POLYVINYL ALCOHOL 1.4% w/v

Sno TEARS is specially formulated with polyvinyl alcohol to bring comfort to dry eye sufferers.

SMITH & NEPHEW
Pharmaceuticals Ltd

Bampton Road, Harold Hill, Romford, Essex, RM3 8SL



Sno® TEARS

PRESENTATION Sno tears is a clear, colourless slightly viscous solution in a plastic dropper bottle. It contains polyvinyl alcohol 1.4% w/v together with benzalkonium chloride 0.004% w/v and disodium edetate 0.02% w/v as an antibacterial system.

USES As an artificial tear and lubricant in cases of tear deficiency.

DOSAGE AND ADMINISTRATION One or more drops as required.

CONTRA-INDICATIONS, WARNINGS etc Sno tears should not be used in patients fitted with soft contact lenses.

PHARMACEUTICAL PRECAUTIONS Sno tears should not be diluted or dispensed from any container other than the original bottle and should be stored in a cool place.

Sno tears is fully potent for three years unopened, but as with other eye drops, it should be discarded one month after opening.

LEGAL CATEGORY P

PRICE Basic NHS cost 82p for 10 ml. bottle.

PRODUCT LICENCE NUMBER: 0033/0097

Date of Preparation November 1982

A major research development
from Pharmacia Ophthalmics.

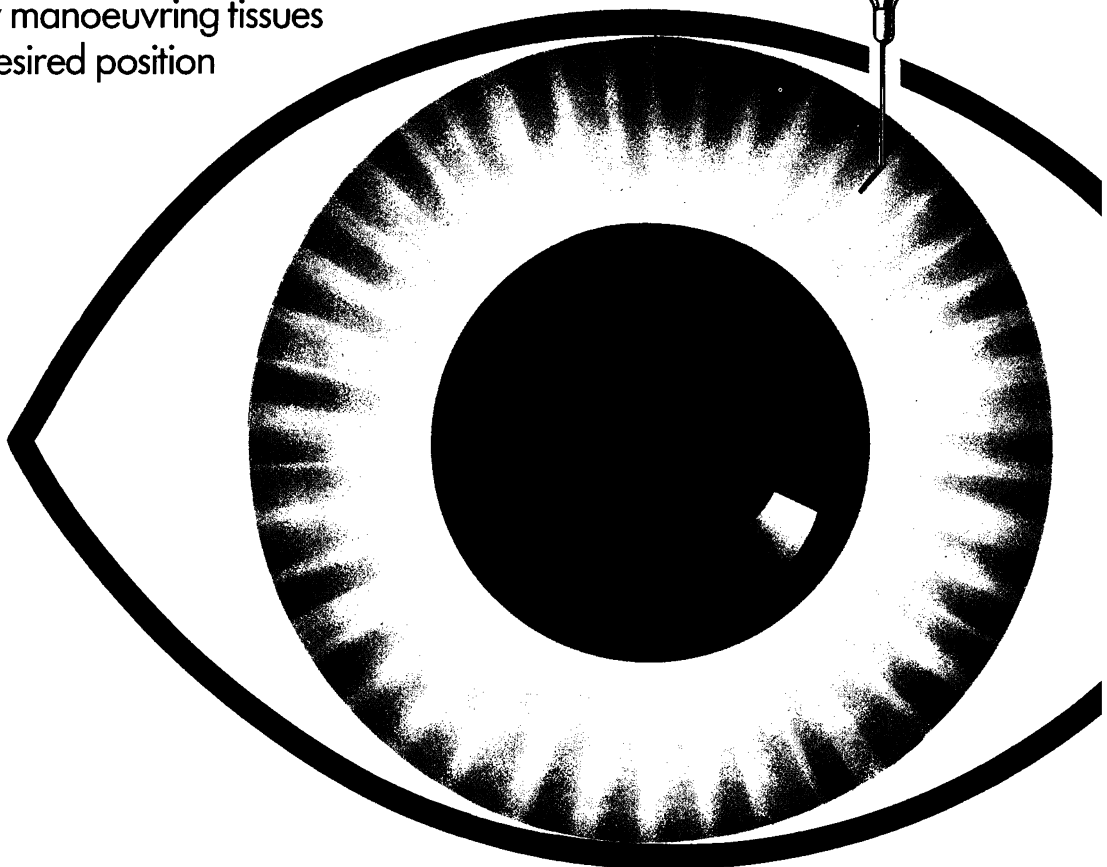
Advancing the art of ophthalmic surgery.

HEALONID

sodium hyaluronate (1%)

Healonid facilitates
IOL implantation, corneal transplantation
and trauma surgery by:

- * maintaining space
- * protecting tissues
- * gently manoeuvring tissues
into desired position



HEALONID®

Healonid is a pure high molecular weight fraction of sodium hyaluronate, with visco-elastic properties that make it a unique and valuable aid to many ophthalmic surgical procedures. Injected into an open anterior chamber, it restores and maintains chamber depth to ease surgical manipulation and provides mechanical protection to delicate cells and tissues. Healonid causes no intraocular inflammation and has been described as offering the ophthalmic surgeon "...advantages and safety margins not available with any other known technique." Pape & Balazs (1980) Ophthalmology, 87, 7, 699.

PRESCRIBING INFORMATION

PRESENTATION

Disposable 0.4 ml syringes containing 1% sodium hyaluronate in aqueous buffer.

USES

Sodium hyaluronate is a visco-elastic polymer normally found in the aqueous and vitreous humour. HEALONID, which contains sodium hyaluronate is a highly viscous clear solution at rest, yet it will readily flow through a fine cannula or needle under pressure. Introduction of HEALONID into the anterior or posterior chamber keeps tissues separated during the operative procedure and protects them from trauma from other tissues or instruments. The anterior chamber depth is maintained, vitreous bulge can be reduced, and the loss of irreplaceable endothelial cells which inevitably accompanies surgery can be greatly reduced.

INDICATIONS

Surgical procedures on the eye, including intraocular lens insertion, intra and extra capsular lens extraction, glaucoma surgery, corneal graft, surgery for accidental trauma, retinal detachment and vitreal replacement procedures.

DOSAGE AND ADMINISTRATION

The syringe is assembled and made ready for use according to the instruction sheet with each syringe.

The indication for use will govern the timing and quantity of HEALONID used. See Data Sheet or HEALONID monograph.

PRECAUTIONS

The anterior chamber should not be over-filled with HEALONID, except in glaucoma surgery. At close of surgery some of the HEALONID should be removed by irrigation or aspiration. Intraocular pressure should be monitored during the post operative period and any excessive rises treated with appropriate therapy.

CONTRA-INDICATIONS, WARNINGS

There are no known contra-indications to HEALONID. Because the drug is extracted from avian tissues, despite rigorous purification procedures minute amounts of protein are present, and thus the remote possibility of idiosyncratic reactions remains.

ADVERSE REACTIONS

The drug is very well tolerated and the only untoward effect reported has been a transient rise in intraocular pressure in a few cases.

PHARMACEUTICAL PRECAUTIONS

Store at 2-8°C protected from light and freezing. Shelf life 3 years.

LEGAL CATEGORY POM.

PACKAGING QUANTITIES AND BASIC NHS PRICE (May 1983)

Disposable syringes containing 0.4 ml. £26.76 each.

FURTHER INFORMATION

HEALONID does not interfere with the healing process. Its use may reduce incidence of synechiae and adhesions. Evidence from animal experiments indicates that HEALONID is no longer present in the anterior chamber six days after introduction.

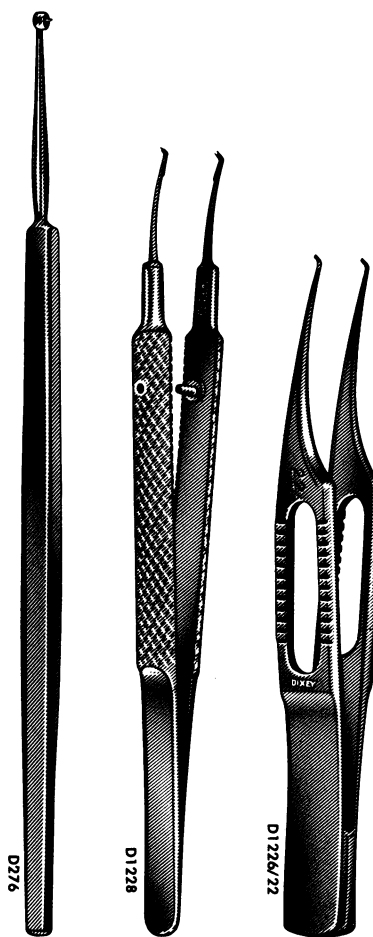
PRODUCT LICENCE NUMBER 0009/0045.



Healonid (regd) sodium hyaluronate (1%) is a product of Pharmacia (Great Britain) Limited, Pharmacia House, Midsummer Boulevard, Milton Keynes, MK9 3HP. Telephone (0908) 661101.

Further information is available on request to the company.

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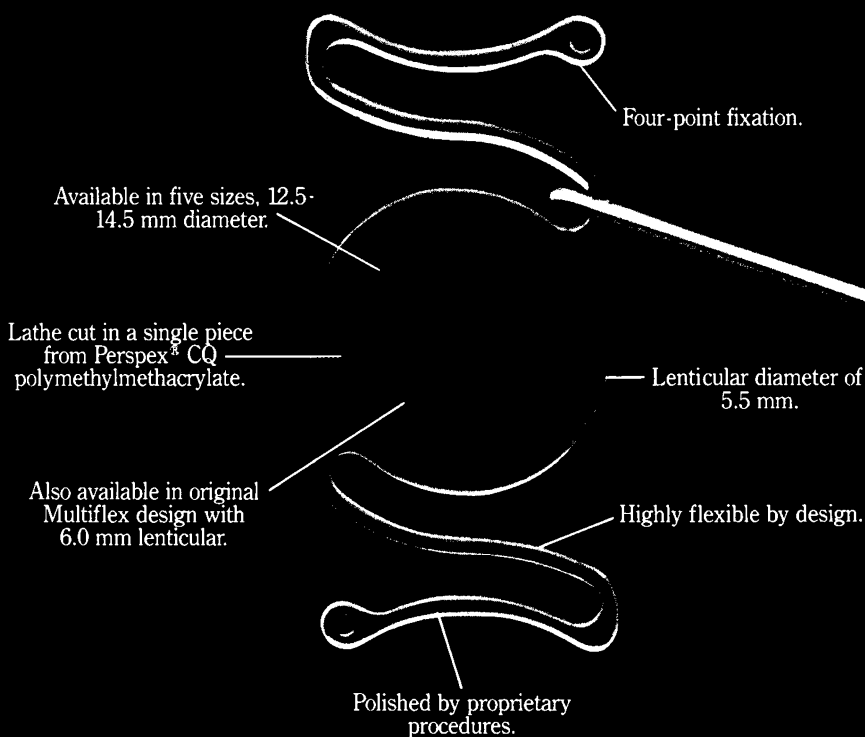
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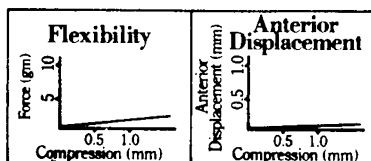


Presentation Where microfine sterile ophthalmic suspension containing fluorometholone (0.1%) **Uses** Topical ophthalmic suspension for steroid responsive inflammation of the palpebral and bulbar conjunctiva, cornea and anterior segment of the globe. **Dosage and administration** 1 to 2 drops instilled into the conjunctival sac two to four times daily. During the initial 24 to 48 hours the dosage may be safely increased to 2 drops every hour. Care should be taken not to discontinue therapy prematurely. **Contra-indications, warnings, etc.** **Contra-indications:** Acute superficial Herpes simplex keratitis. Fungal diseases of ocular structures. Varicella, varicella and most other viral diseases of the cornea and conjunctiva. Tuberculosis of the eye. Hypersensitivity to the constituents of this medication. **Warnings:** Steroid medication in the treatment of Herpes simplex keratitis (involving the stroma) requires great caution. Frequent slit lamp microscopy is mandatory. Prolonged use may result in glaucoma, damage to the optic nerve, defects in visual acuity and fields of vision, posterior subcapsular cataract formation, or may aid in the establishment of secondary ocular infections from fungi or viruses liberated from ocular tissue. In those diseases causing thinning of the cornea or sclera, perforation has been known to occur with use of topical steroids. Safety and effectiveness have not been demonstrated in children of the age group two years or below. This preparation contains benzalkonium chloride and should be used with caution in association with hydrophilic contact lenses. **Use in pregnancy:** Safety of the use of topical steroids during pregnancy has not been established. **Precautions:** As fungal infections of the cornea are particularly prone to develop coincidentally with long term local steroid applications, fungus invasion must be suspected in any persistent corneal ulceration where a steroid has been used or is in use. Intra ocular pressure should be checked frequently. **Adverse reactions:** Glaucoma with optic nerve damage, visual acuity or field defects, posterior subcapsular cataract formation, secondary ocular infection from pathogens liberated from ocular tissues, perforation of the globe. Local side-effects of steroid therapy, i.e. skin atrophy, striae and telangiectasia, are especially likely to affect facial skin. **Pharmaceutical precautions** Protect from freezing. **Legal category POM Package quantities:** Supplied in plastic dropper bottles of 5 ml and 10 ml. Basic NHS cost (as at August 1982) 5 ml - £1.62, 10 ml - £2.57. P1, 0426/0026. Full prescribing information is available on request. **References** 1. Castroviejo R. Proceedings of 7th Ann. Meeting Am. Acad. Ophthalmol. Oculungol (1974) October 2. Fairbairn W.D. Thorson J.C. Arch. Ophthalmol. (1971) **86**, 138-141. 3. Kozawa Y. Am. J. Ophthalmol. (1976) **82**, 3 492-495. 4. Stewart R.H. Kimbrough R.L. Arch. Ophthalmol. (1979) **97**, 2139-2140. 5. Mendel J.S. et al. Arch. Ophthalmol. (1980) **98**, 1577-1578.

The KelmanTM Multiflex^{TM*} II anterior chamber lens from Cilco.



*U.S. Patent no. 4,174,543

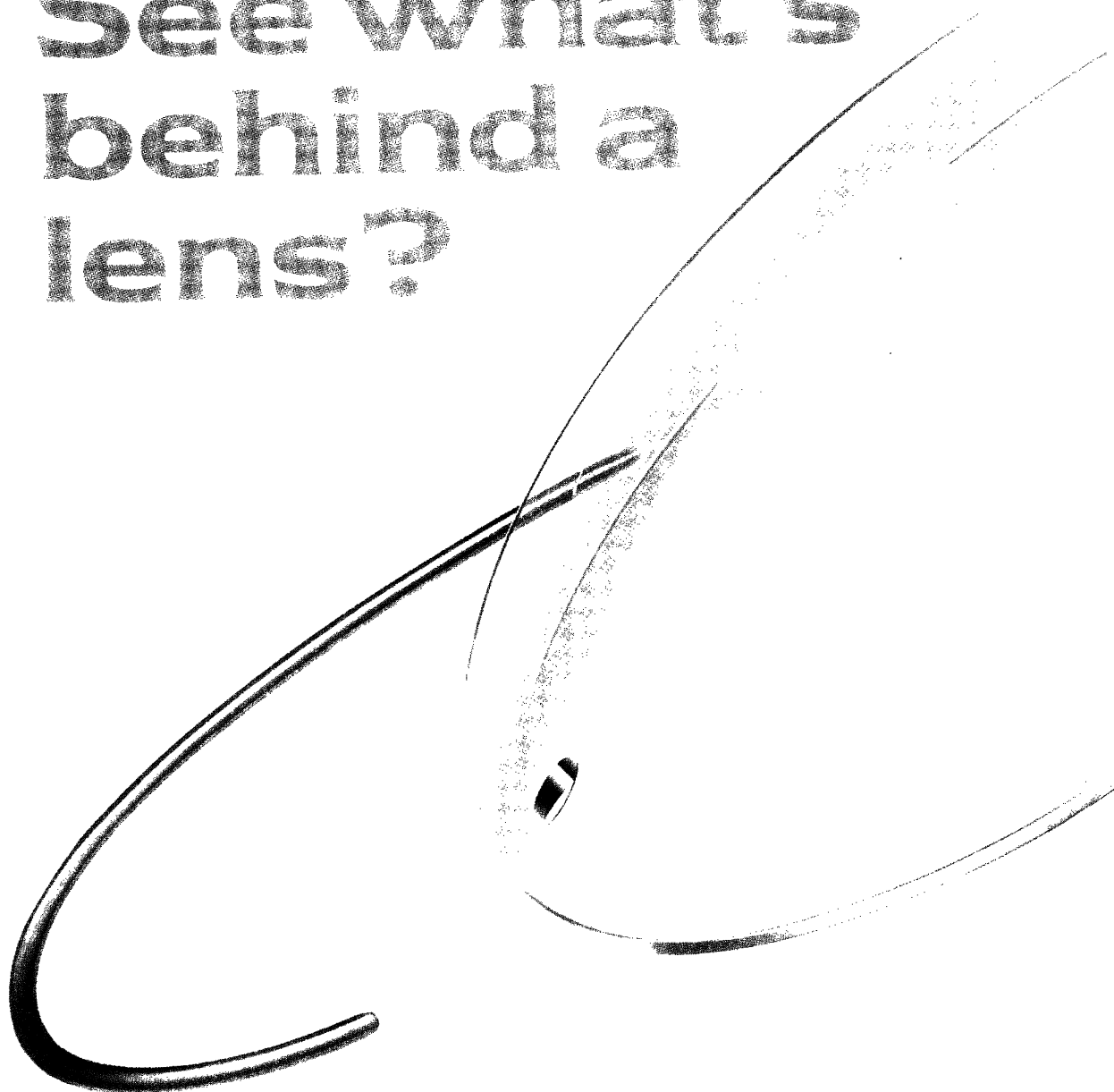


Highly flexible, the KelmanTM Multiflex^{TM*} II anterior chamber lens helps facilitate insertion and minimize postoperative tenderness. Yet the patented design means minimal anterior displacement of the lens optic, as demonstrated by these graphs. Please contact your Cilco office for additional information, surgical protocol or videotape on implantation with Charles D. Kelman, M.D.

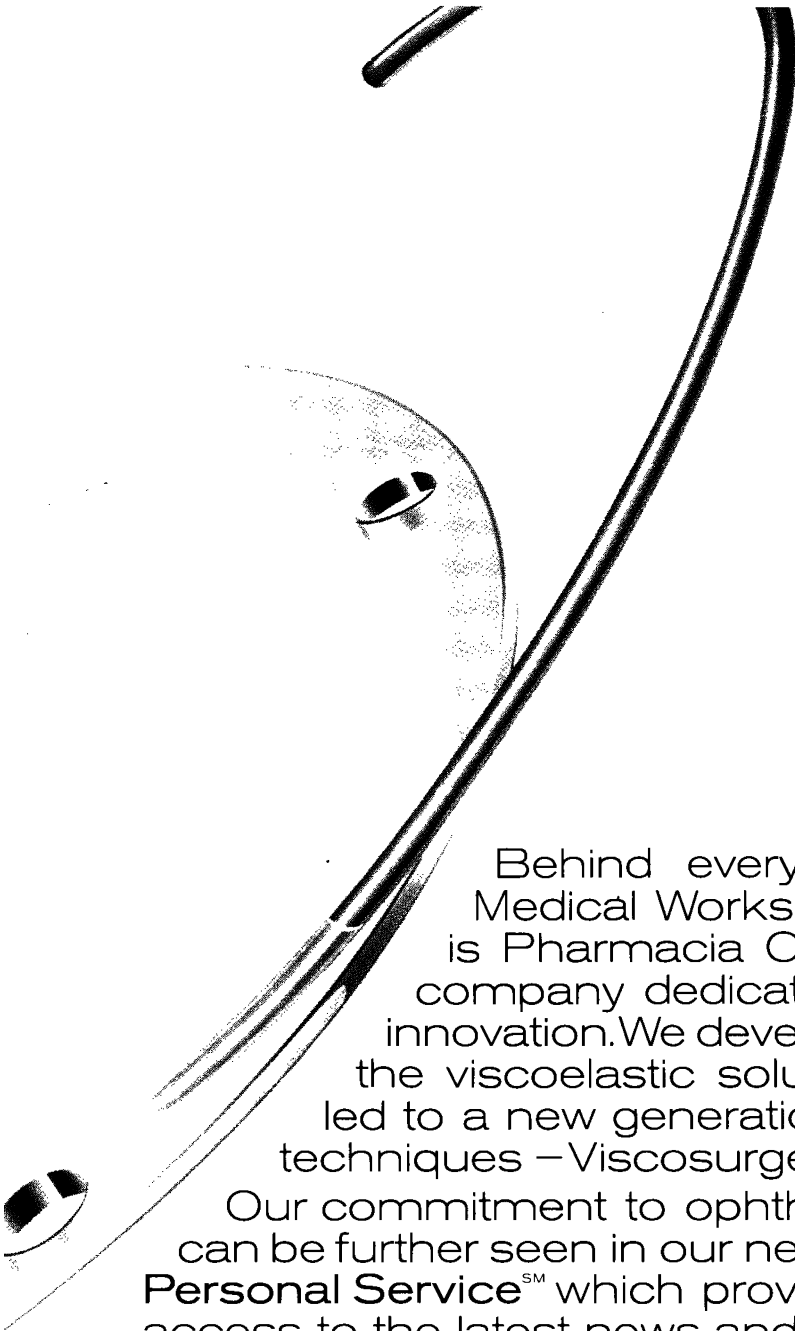
CILCO

U.K., Ireland and Scandinavia: CILCO, Inc., 3 Waterdene House, Water Lane, Leighton Buzzard, Bedfordshire LU77AW, England • Telephone: (0525) 381122; U.S.A.: CILCO, Inc., 1616 13th Avenue, Box 1680, Huntington, WV 25717 • Telephone: 304-697-4422; Australia • Canada • Europe, Middle East and Africa • Japan and Korea • Latin America • W. Germany.

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Healonid is a pure high molecular weight fraction of sodium hyaluronate, with visco-elastic properties that make it a unique and valuable aid to many ophthalmic surgical procedures. Injected into an open anterior chamber, it restores and maintains chamber depth to ease surgical manipulation and provides mechanical protection to delicate cells and tissues. Healonid causes no intraocular inflammation and has been described as offering the ophthalmic surgeon "...advantages and safety margins not available with any other known technique." Pape & Balazs (1980) *Ophthalmology*, 87, 7, 699.

PRESCRIBING INFORMATION

PRESENTATION

Disposable 0.4 ml syringes containing 1% sodium hyaluronate in aqueous buffer.

USES

Sodium hyaluronate is a visco-elastic polymer normally found in the aqueous and vitreous humour. HEALONID, which contains sodium hyaluronate is a highly viscous clear solution at rest, yet it will readily flow through a fine cannula or needle under pressure. Introduction of HEALONID into the anterior or posterior chamber keeps tissues separated during the operative procedure and protects them from trauma from other tissues or instruments. The anterior chamber depth is maintained, vitreous bulge can be reduced, and the loss of irreplaceable endothelial cells which inevitably accompanies surgery can be greatly reduced.

INDICATIONS

Surgical procedures on the eye, including intraocular lens insertion, intra and extra capsular lens extraction, glaucoma surgery, corneal graft, surgery for accidental trauma, retinal detachment and vitreal replacement procedures.

DOSAGE AND ADMINISTRATION

The syringe is assembled and made ready for use according to the instruction sheet with each syringe.

The indication for use will govern the timing and quantity of HEALONID used. See Data Sheet or HEALONID monograph.

PRECAUTIONS

The anterior chamber should not be over-filled with HEALONID, except in glaucoma surgery. At close of surgery some of the HEALONID should be removed by irrigation or aspiration. Intraocular pressure should be monitored during the post operative period and any excessive rises treated with appropriate therapy.

CONTRA-INDICATIONS, WARNINGS

There are no known contra-indications to HEALONID. Because the drug is extracted from avian tissues, despite rigorous purification procedures minute amounts of protein are present, and thus the remote possibility of idiosyncratic reactions remains.

ADVERSE REACTIONS

The drug is very well tolerated and the only untoward effect reported has been a transient rise in intraocular pressure in a few cases.

PHARMACEUTICAL PRECAUTIONS

Store at 2-8°C protected from light and freezing. Shelf life 3 years.

LEGAL CATEGORY POM

PACKAGING QUANTITIES AND BASIC NHS PRICE (May 1983)

Disposable syringes containing 0.4 ml. £26.76 each.

FURTHER INFORMATION

HEALONID does not interfere with the healing process. Its use may reduce incidence of synechiae and adhesions. Evidence from animal experiments indicates that HEALONID is no longer present in the anterior chamber six days after introduction.

PRODUCT LICENCE NUMBER 0009/0045.

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Alcon

Alcon Laboratories (U.K.) Ltd.,
Imperial Way,
Watford,
Herts.

*International trademark TOBREX

Presentation: A sterile, colourless to very pale yellow ophthalmic solution containing Tobramycin BP 0.3% w/v, preserved with 0.01% Benzalkonium Chloride BP, packed in 5 ml Drop-Tainers. **Uses:** Tobramycin is an aminoglycoside antibiotic active against a wide variety of Gram-negative and Gram-positive ophthalmic pathogens. Tobrallex (tobramycin) Sterile Ophthalmic Solution is a bactericidal topical antibiotic indicated in the treatment of external bacterial conditions of the eye and its appendages. The spectrum of activity covers a wide range of Gram-positive organisms and many Gram-negative organisms. A significant bacterial population resistant to tobramycin has not yet been reported. However, there is the possibility that bacterial resistance may develop following prolonged use. **Dosage and Administration:** Adults and children: In mild to moderate cases, instill one or two drops into the affected eye every four hours. For severe infections, instill two drops into the eye hourly until there is an improvement and then reduce treatment, prior to discontinuation. **Contra-indications, warnings, etc. Contra-indications:** Persons with known sensitivity to tobramycin or gentamicin. **Warnings:** Sensitivity may occur in some patients. If so, discontinue use. Transient irritation may occur with some susceptible patients. Tobrallex ophthalmic solution is not for injection. **Precautions:** As with other antibiotics, prolonged use may result in the overgrowth of non-susceptible organisms, including fungi. If super-infection occurs, appropriate therapy should be initiated. **Pharmaceutical Precautions:** Store at 8°C to 25°C. Do not freeze. Keep the container tightly closed and out of the reach of children. Discard contents one month after opening. Sterile until opened. **Legal Category:** POM. **Package quantity:** 5 ml in Drop-Tainer dispensers. **Further Information:** Tobrallex eye drops are contained in an unbreakable semi-rigid plastic dropper bottle with screw-on cap containing 5 ml of the preparation. **Product License No.:** 0649/0044 **Product License Holder:** Alcon Laboratories (U.K.) Ltd., Imperial Way, Watford, Herts. **References:** 1. Cagle, G.D. and Abshire, R.L.: "Quantitative Ocular Bacteriology. A Method for the Enumeration and Identification of Bacteria from the Skin Lash Margin and Conjunctiva." Investigative Ophthalmology and Visual Science 20:751-758 (June) 1981. 2. Data on file, Alcon Laboratories, Inc. 3. Smith, J.P.: Data on file, Alcon Laboratories, Inc. 4. Cagle, G. et al.: "Topical Tobramycin and Gentamicin Sulfate in the Treatment of Ocular Infections: Multicenter Study." Current Eye Research 1:523-534, 1982.

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When natural (human!) tears are lacking, Liquifilm Tears closely resemble the human tear, having the same viscosity range and surface tension¹, and maintain the stability of the lipid film², impeding aqueous evaporation.

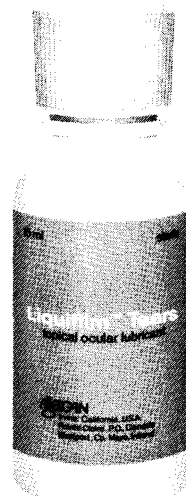
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(polyvinyl alcohol)

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Allergan Limited,
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Presentation: clear, colourless to slightly straw coloured sterile, aqueous ophthalmic solution, containing polyvinyl alcohol 1.4%. *Uses:* for dry eyes, especially where natural mucus is absent, or deficient, also an ocular lubricant. *Dosage and administration:* 1 drop in the eye as needed, or as directed. *Contra-indications, warnings etc:* not for use with soft contact lenses. If irritation increases or persists, discontinue use. *Pharmaceutical precautions:* nil. *Legal category:* P. *Packaging quantities:* Liquifilm Tears is available in plastic dropper bottles containing 15ml. *Further information:* nil. *Basic NHS cost (as at March 1982)* £1.21. PL 0426/0009. Further information is available on request. *Refs:* 1. Flynn F, *Med J Australia* (1967) 1,2, 33-41. 2. Holly, F. J., *Contact and Intraocular Lens Medical Journal* (1978) 4,3, 52-65. 3. Krishna N, Brow F, *Am J Ophth* (1964) 57: 99-106.

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DROPS: One or two drops to be instilled into the conjunctival sac, 4-6 times daily. Dosage may be reduced after 3-4 days when a satisfactory response has been obtained.

OINTMENT: Apply a small amount of ointment into the conjunctival sac, 3-6 times a day. When a favourable response is observed, the dosage may be reduced to 3-4 applications per day. This may be followed by once a day applications for several more days.

Drop in after work.

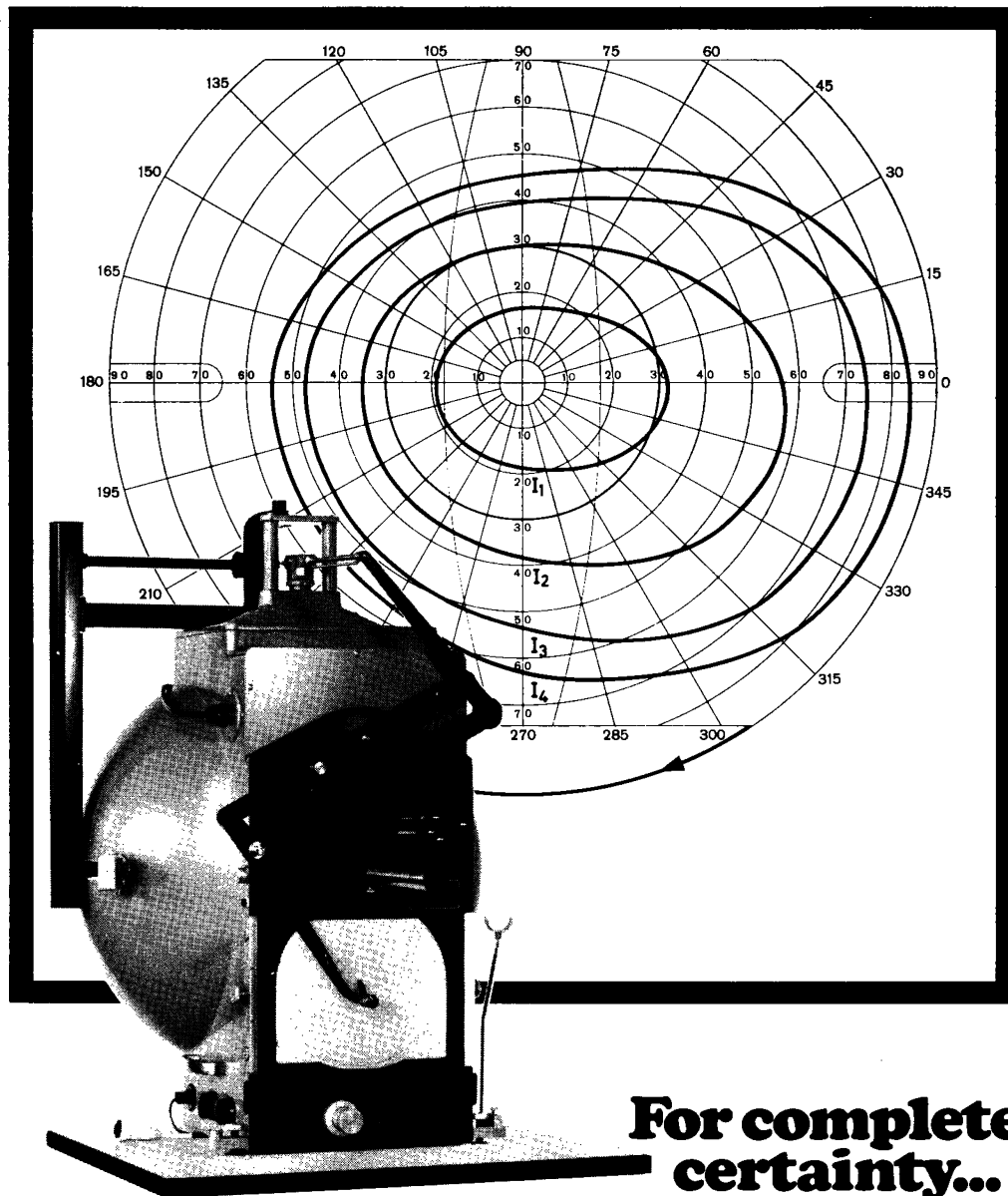
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Alcon

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Preservative Drops: Dexamethasone BP 0.1% Polymyxin B Sulphate USP 6000 units/ml and Neomycin Sulphate equivalent to Neomycin 3.5 mg/ml in a vehicle containing 0.5% hydroxypropyl methylcellulose (Hydroxypropyl). A sterile, isotonic, ophthalmic suspension. Ointment: Dexamethasone BP 0.1% Polymyxin B Sulphate USP 6000 units/g and Neomycin Sulphate equivalent to Neomycin 3.5 mg/g in an ointment base. Clinical uses: Management of infectious ocular inflammations produced by organisms which are sensitive to Neomycin Sulphate and Polymyxin B Sulphate. Acute or chronic non-purulent conjunctivitis, blepharoconjunctivitis, keratoconjunctivitis, non-specific, superficial keratitis, deep keratitis, and acute roseolar keratitis, herpes zoster ophthalmicus, iridocyclitis, mild acute iritis, recurrent marginal ulceration, corneal ulcer, non-purulent blepharitis, scleritis, episcleritis and scleroconjunctivitis. Post-operatively to prevent ocular infection. Ocular inflammation. This drug is contraindicated in tuberculous, fungal and most viral lesions of the eye (herpes simplex/dendritic keratitis; varicella; varicella; acute purulent conjunctivitis and acute purulent blepharitis; and in those persons who have shown hypersensitivity to any of its components. Warnings: Extended use of topical therapy may cause increased intraocular pressure in certain individuals. It is advisable that intraocular pressure be checked frequently, in those cases causing swelling of the cornea, perforation has been known to occur with the use of topical steroids. Prolonged use may result in overgrowth of non-susceptible organisms including fungi. If the condition does not respond within a reasonable period other forms of therapy should be instituted. Appropriate measures should be taken when this occurs. A few individuals may be sensitive to one or more components of this product. If any reactions indicating sensitivity are observed discontinue use. Extended use of topical steroids is a possible factor in the formation of subcapsular cataracts. Pregnancy: Warning: Although topical steroids have not been reported to have an adverse effect on pregnancy, the safety of their use in pregnancy has not been absolutely established, therefore it is advisable not to use this product for long term treatment of pregnant patients. Precautions: Preservative Drops: 5 ml. container; Ointment: 3.5 g. Plastic eye-drops should be stored in a cool place away from direct sunlight. Keep the container tightly closed. Contents should be discarded one month after opening. Drops should be well shaken before use. Legal Category POM P.1. T.S.A. Note: Ointment/Maxitrol eye-drops are contained in a tube with a screw-on cap. This tube bears the label and is held in a rigid capped plastic outer. Product Licence Holder Alcon Laboratories (UK) Limited, Imperial Way, Watford, Hertfordshire, Beds of Local Licence May 1978.



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